

County: Jefferson
FORT HEALTH/REHABILITATION CENTER
430 WILCOX STREET

Facility ID: 3470

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FORT ATKINSON 53538 Phone:(920) 563-5533
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/02): 94
Total Licensed Bed Capacity (12/31/02): 126
Number of Residents on 12/31/02: 86

Ownership:
Highest Level License: Skilled
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 90

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		46.5
Supp. Home Care-Personal Care	No	-----		-----		1 - 4 Years		37.2
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	5.8	More Than 4 Years		16.3
Day Services	No	Mental Illness (Org./Psy)	12.8	65 - 74	16.3			-----
Respite Care	Yes	Mental Illness (Other)	1.2	75 - 84	26.7			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	1.2	85 - 94	43.0	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	8.1	Full-Time Equivalent		
Congregate Meals	No	Cancer	3.5		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	Yes	Fractures	12.8		100.0	(12/31/02)		
Other Meals	No	Cardiovascular	19.8	65 & Over	94.2	-----		
Transportation	No	Cerebrovascular	14.0		-----	RNs		4.8
Referral Service	No	Diabetes	1.2	Sex	%	LPNs		8.3
Other Services	No	Respiratory	3.5	-----		Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	30.2	Male	37.2	Aides, & Orderlies		
Mentally Ill	No		-----	Female	62.8			47.0
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care						
Level of Care		No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All
Int. Skilled Care		1	6.7	411	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.2
Skilled Care		14	93.3	322	39	81.3	107	0	0.0	0	22	95.7	165	0	0.0	0	0	0.0	0	75	87.2
Intermediate		---	---	---	9	18.8	90	0	0.0	0	1	4.3	165	0	0.0	0	0	0.0	0	10	11.6
Limited Care		---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care		---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care		---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled		---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj		0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent		0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total		15	100.0		48	100.0		0	0.0		23	100.0		0	0.0		0	0.0		86	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02							

Percent Admissions from:		Activities of		% Needing				Total	
				Assistance of		% Totally		Number of	
Private Home/No Home Health	4.3	Daily Living (ADL)	Independent	One Or Two Staff		Dependent		Residents	
Private Home/With Home Health	1.7	Bathing	4.7	67.4		27.9		86	
Other Nursing Homes	7.8	Dressing	16.3	57.0		26.7		86	
Acute Care Hospitals	84.3	Transferring	27.9	53.5		18.6		86	
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	17.4	52.3		30.2		86	
Rehabilitation Hospitals	0.0	Eating	54.7	33.7		11.6		86	
Other Locations	1.7	*****							
Total Number of Admissions	115	Continence		%	Special Treatments				
Percent Discharges To:		Indwelling Or External Catheter	10.5	Receiving Respiratory Care		18.6			
Private Home/No Home Health	21.2	Occ/Freq. Incontinent of Bladder	57.0	Receiving Tracheostomy Care		0.0			
Private Home/With Home Health	12.7	Occ/Freq. Incontinent of Bowel	39.5	Receiving Suctioning		0.0			
Other Nursing Homes	7.6			Receiving Ostomy Care		2.3			
Acute Care Hospitals	14.4	Mobility		Receiving Tube Feeding		4.7			
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	0.0	Receiving Mechanically Altered Diets		31.4			
Rehabilitation Hospitals	0.8								
Other Locations	7.6	Skin Care		Other Resident Characteristics					
Deaths	35.6	With Pressure Sores	2.3	Have Advance Directives		100.0			
Total Number of Discharges		With Rashes	1.2	Medications					
(Including Deaths)	118			Receiving Psychoactive Drugs		83.7			

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 100-199 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	71.4	85.1	0.84	85.5	0.84	86.7	0.82	85.1	0.84
Current Residents from In-County	62.8	75.4	0.83	78.5	0.80	69.3	0.91	76.6	0.82
Admissions from In-County, Still Residing	20.9	20.1	1.04	24.7	0.85	22.5	0.93	20.3	1.03
Admissions/Average Daily Census	127.8	138.3	0.92	114.6	1.11	102.9	1.24	133.4	0.96
Discharges/Average Daily Census	131.1	139.7	0.94	114.9	1.14	105.2	1.25	135.3	0.97
Discharges To Private Residence/Average Daily Census	44.4	57.6	0.77	47.9	0.93	40.9	1.09	56.6	0.79
Residents Receiving Skilled Care	88.4	94.3	0.94	94.9	0.93	91.6	0.96	86.3	1.02
Residents Aged 65 and Older	94.2	95.0	0.99	94.1	1.00	93.6	1.01	87.7	1.07
Title 19 (Medicaid) Funded Residents	55.8	64.9	0.86	66.1	0.84	69.0	0.81	67.5	0.83
Private Pay Funded Residents	26.7	20.4	1.31	21.5	1.24	21.2	1.26	21.0	1.27
Developmentally Disabled Residents	0.0	0.8	0.00	0.6	0.00	0.6	0.00	7.1	0.00
Mentally Ill Residents	14.0	30.3	0.46	36.8	0.38	37.8	0.37	33.3	0.42
General Medical Service Residents	30.2	23.6	1.28	22.8	1.32	22.3	1.35	20.5	1.48
Impaired ADL (Mean)	49.8	48.6	1.02	49.1	1.01	47.5	1.05	49.3	1.01
Psychological Problems	83.7	55.2	1.52	53.4	1.57	56.9	1.47	54.0	1.55
Nursing Care Required (Mean)	7.6	6.6	1.14	6.8	1.11	6.8	1.11	7.2	1.05